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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/078,837 02/21/2002 ABN  
 which claims benefit of 60/330,279 10/18/2001

*3/28/05*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE DNE 1/29/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 11/03/2003

## \*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AL	SHEETS DRAWING 5	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> After Allowance				
Verified and Acknowledged	<i>James Brown</i> Examiner's Signature Initials <i>JBB 1/29/05</i>				

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## TITLE

Scent dispenser

FILING FEE RECEIVED 559	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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